## **Late Contribution Report**

## Type or print in ink. Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

| NAME OF FILER  No on Prop 10 - A Flav advocates, renters, larg | The Housing Crisis Worse a coalition of housing or groups, and veterans | Date of<br>This Filing _                | 08/07/2018                    | Date Stamp                                                                        | CALIFORNIA 497 |                       |             |
|----------------------------------------------------------------|-------------------------------------------------------------------------|-----------------------------------------|-------------------------------|-----------------------------------------------------------------------------------|----------------|-----------------------|-------------|
| AREA CODE/PHONE NUMBER<br>(916)442-7757                        |                                                                         | I.D. NUMBER (if applicable) 1406422     | Report No.                    | 240603-05                                                                         |                | For Official Use Only |             |
| STREET ADDRESS                                                 |                                                                         | ☐ Amendme to Report No                  |                               | Page 1 of 2                                                                       |                |                       |             |
| CITY<br>Sacramento                                             |                                                                         | STATE ZIP CODE<br>CA 95814              | (explain below)  No. of Pages | 2                                                                                 |                |                       |             |
| Late Contribu                                                  | ıtion(s) Received                                                       |                                         |                               |                                                                                   |                |                       |             |
| DATE<br>RECEIVED                                               | FULL NAM                                                                | BUTOR                                   | CONTRIBUTOR<br>CODE *         | IF AN INDIVIDUAL<br>ENTER OCCUPATION AND EN<br>(IF SELF-EMPLOYED, ENTER NAME OF B |                | AMOUNT<br>RECEIVED    |             |
| 08/03/2018                                                     | Western Manufactured Hou<br>Sacramento, CA 95814<br>ID# 890865          | sing Communities Association Issues PAC |                               | ☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC ☐ IND                                               |                |                       | \$50,000.00 |
|                                                                |                                                                         |                                         |                               | COM OTH PTY SCC                                                                   |                |                       |             |
|                                                                |                                                                         |                                         |                               | ☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC                                                     |                |                       |             |
| *Contributor Codes                                             |                                                                         | PTY - Political Party                   |                               |                                                                                   |                |                       |             |

SCC - Small Contributor Committee

Reason for Amendment:

OTH - Other

COM - Recipient Committee (other than PTY or SCC)

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

## **Late Contribution Report**

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LATE CONTRIBUTION REPORT

| NAME OF FILER  No on Prop 10 - A Flawed Initiative That Will Make The Housing Crisis Worse a coalition of housing advocates, renters, large and small businesses, taxpayer groups, and veterans  AREA CODE/PHONE NUMBER  I.D. NUMBER (if applicable) |                                                                                             |    |                               | Date of<br>This Filing  | D                                                      | ate Stamp   | CALIFORNIA FORM 497   |  |                                     |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|----|-------------------------------|-------------------------|--------------------------------------------------------|-------------|-----------------------|--|-------------------------------------|--|
| (916)442-7757 1.D. NOWBER (if applicable)                                                                                                                                                                                                            |                                                                                             | ., | Report No                     | 240603-05               |                                                        |             | For Official Use Only |  |                                     |  |
| STREET ADDRESS                                                                                                                                                                                                                                       |                                                                                             |    |                               | Amendment to Report No. |                                                        | Page 2 of 2 |                       |  |                                     |  |
| CITY STATE ZIP CODE Sacramento CA 95814                                                                                                                                                                                                              |                                                                                             |    | (explain below)  No. of Pages | 2                       |                                                        |             |                       |  |                                     |  |
| Late Contr                                                                                                                                                                                                                                           | ibution(s) Made                                                                             |    |                               |                         |                                                        |             |                       |  |                                     |  |
| DATE<br>MADE                                                                                                                                                                                                                                         | FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) |    |                               |                         | CANDIDATE AND OFFICE<br>OR<br>MEASURE AND JURISDICTION |             |                       |  | DATE OF ELECTION<br>(IF APPLICABLE) |  |
|                                                                                                                                                                                                                                                      |                                                                                             |    |                               |                         |                                                        |             |                       |  |                                     |  |
|                                                                                                                                                                                                                                                      |                                                                                             |    |                               |                         |                                                        |             |                       |  |                                     |  |
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Reason for Amendment:

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC